Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Samantha First name	First name	
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Murphy Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	1		_
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9320		_

Official Form 101

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	200 Solon Rd.	If Debtor 2 lives at a different address:			
		Redford, OH 44146 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cuyahoga				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Del	otor 1 Samantha R. Murp	hy				Case number (if known)	
Pai	rt 2: Tell the Court About	∕our Ban	kruptcy Case				
7.	The chapter of the Bankruptcy Code you are			of description of each, see to the top of page 1 an		by 11 U.S.C. § 342(b) for Individuals in the box.	Filing for Bankruptcy
	choosing to file under	■ Chap	pter 7				
		☐ Chap	pter 11				
		☐ Cha _l	pter 12				
		☐ Chap	pter 13				
8.	How you will pay the fee	at or	oout how you n	may pay. Typically, if yo orney is submitting you	u are paying the fe	heck with the clerk's office in your loca e yourself, you may pay with cash, cas behalf, your attorney may pay with a c	shier's check, or money
				ne fee in installments. n Installments (Official F		option, sign and attach the Application	for Individuals to Pay
		☐ Ir bu ap	request that mut is not require oplies to your fa	ny fee be waived (You ed to, waive your fee, ar amily size and you are	may request this on nd may do so only i unable to pay the fe	ption only if you are filing for Chapter 7 if your income is less than 150% of the ee in installments). If you choose this conficial Form 103B) and file it with your	e official poverty line that option, you must fill out
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			District _		When	Case number	
			District _		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District _		When	Case number, if know	vn
			Debtor _			Relationship to you	
			District		When	Case number, if knov	/n
11.	Do you rent your residence?	□ No.	Go to line	12.			
	residence (Yes.	Has your l	landlord obtained an ev	iction judgment aga	ainst you?	
			■ No	o. Go to line 12.			
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101/bankruptcy petition.				and file it with this			

Deb	tor 1 Samantha R. Mur	phy		Case number (if known)
ar	Report About Any Bu	ısinesses	You Own as a Sole Pro	prietor
	Are you a sole proprietor			
	of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of	business
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.		Check the appropriat	e box to describe your business:
	·			Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset I	Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Commodity B	roker (as defined in 11 U.S.C. § 101(6))
			☐ None of the a	bove
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	es. If you indicate that you	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under (Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Cha Code.	oter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Cha	pter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
)or	t 4: Report if You Own or	· Hava An	v Hazardaua Branarty a	Any Property That Needs Immediate Attention
	•		y nazardous Property of	Any Property That Needs infinediate Attention
4.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it neede	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	O			Number, Street, City, State & Zip Code

Debtor 1 Samantha R. Murphy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Samantha R. Murp	hy		Case number ((if known)
Par	6: Answer These Questi	ons for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,		d in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ss debts? Business debts are debts that or through the operation of the business	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe th	at are not consumer debts or business	debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for	■ Yes.			
	distribution to unsecured creditors?				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	\$100 ,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Par	7: Sign Below				
For	you	I have ex	camined this petition, and I declare u	under penalty of perjury that the informa	tion provided is true and correct.
				a aware that I may proceed, if eligible, unavailable under each chapter, and I choo	
document, I have obtain			rney represents me and I did not pa nt, I have obtained and read the noti	y or agree to pay someone who is not a ce required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
			relief in accordance with the chapte	er of title 11, United States Code, specif	ied in this petition.
		bankrupt and 3571	cy case can result in fines up to \$25	realing property, or obtaining money or p 50,000, or imprisonment for up to 20 year	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Samant	tha R. Murphy e of Debtor 1	Signature of Debtor 2	2
		Executed	March 7, 2019 MM / DD / YYYY	Executed on MM /	DD / YYYY

Official Form 101

Debtor 1 Samantha R. Murphy		Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anna Marie Wall Signature of Attorney for Debtor	Date	March 7, 2019 MM / DD / YYYY
Anna Marie Wall 0095884 Printed name		
Rauser & Associates Firm name		
614 W. Superior # 950 Cleveland, OH 44113		
Number, Street, City, State & ZIP Code Contact phone 216-263-6200	Email address	www.ohiolegalclinic.com
0095884 OH Bar number & State		

Filli	n this inform	nation to identify you	r case:			
Deb		Samantha R. Mu				
Deb	tor 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case	e number					
(if kno	own)				_	k if this is an ded filing
					amon	aca iiiiig
Off	icial For	rm 106Sum				
			and Liabilities an	d Certain Statistical Information		12/15
infor your	mation. Fill o	out all of your schedu	lles first; then complete the	are filing together, both are equally responsible e information on this form. If you are filing amen the box at the top of this page.		
Part	Summa	arize rour Assets			Your a	ssets of what you own
1.	Schedule A/ 1a. Copy line	/B: Property (Official e 55, Total real estate,	Form 106A/B) from Schedule A/B		\$	0.00
	1b. Copy line	e 62, Total personal pi	operty, from Schedule A/B		\$	16,134.00
	1c. Copy line	e 63, Total of all prope	rty on Schedule A/B		\$	16,134.00
Part	2: Summa	arize Your Liabilities				
					Your li	abilities
					Amour	t you owe
2.			Claims Secured by Property umn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i>	\$	20,000.00
3.	Schedule E/I 3a. Copy the	F: Creditors Who Have e total claims from Par	e Unsecured Claims (Official t 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	2,000.00
	3b. Copy the	e total claims from Par	t 2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	81,679.90
				Your total liabilities	s \$	103,679.90
Part	3: Summa	arize Your Income ar	d Expenses			
4.		Your Income (Official Formbined monthly inco		I	\$	2,050.03
5.		Your Expenses (Offici			\$	2,113.00
Part	4: Answe	r These Questions fo	or Administrative and Statis	stical Records		
6.	-		der Chapters 7, 11, or 13? rt on this part of the form. Ch	neck this box and submit this form to the court with y	our other sc	hedules.
7.	■ Yes What kind o	of debt do you have?				
				lebts are those "incurred by an individual primarily fog for statistical purposes. 28 U.S.C. § 159.	r a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,300.65

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	52,078.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	54,078.00

Fill in this info	rmation to identify you	r case and this filing:			
Debtor 1	Samantha R. Mu	. ,			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Sankruntcy Court for the	NORTHERN DISTRICT O	F OHIO		
Office Otates B	ankruptcy Court for the.	- NORTHER DIOTRIOT O	1 01110		
Case number					☐ Check if this is an amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	perty			12/15
In each category, think it fits best.	separately list and descri Be as complete and accur ore space is needed, attacl	be items. List an asset only on ate as possible. If two married	ce. If an asset fits in more than on people are filing together, both a control of any additional page.	are equally responsible for su	oplying correct
Part 1: Describe	e Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do you own or	have any legal or equitab	le interest in any residence, bu	uilding, land, or similar property?		
■ No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	o Vour Vohiclos				
Part 2. Describ	e rour venicles				
□ No ■ Yes 3.1 Make:	Chevrolet	Who has an intere	st in the property? Check one	Do not deduct secured cla	
Model:	Malibu	Debtor 1 only	St III the property ! Check one	the amount of any secure Creditors Who Have Clair	
Year:	2013	Debtor 2 only			, , ,
		Debtor 2 only Debtor 1 and De	ebtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other info	rmation:	<u> </u>	ne debtors and another		
	n: 200 Solon Rd., I OH 44146	☐ Check if this is (see instructions)	community property	\$7,175.00	\$7,175.00
4 Matararaft a	singuality makes because	ATVo and other recreations	d vahialas athar vahialas am	d	
			al vehicles, other vehicles, an els, snowmobiles, motorcycle a		
■ No					
□ Yes					
- 103					
			ries from Part 2, including ar		\$7,175.00
Part 3: Describ	e Your Personal and Hous	sehold Items			
Do you own or	have any legal or equi	table interest in any of the	following items?	r E	Current value of the cortion you own? On not deduct secured laims or exemptions.
	goods and furnishings lajor appliances, furniture	e, linens, china, kitchenware			
Official Form 106	6A/B	Schedul	e A/B: Property		page 1

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D	ebtor 1	Samantha F	R. Murphy		Case number (if known,	
	■ Yes.	Describe				
			Small Appliances, Ho	usehold Goods & Furnishings		\$2,000.00
7.	□ No	les: Televisions a	II phones, cameras, media pl		printers, scanners; music	
			Two t.v.'s, cellphone,	and tablet		\$2,000.00
8.	Exampl		d figurines; paintings, prints, iions, memorabilia, collectible	or other artwork; books, pictures, or otles	her art objects; stamp, coir	n, or baseball card collections;
9.	Exampl ■ No	ent for sports a les: Sports, photo musical insti	ographic, exercise, and other	r hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
10	■ No		es, shotguns, ammunition, an	d related equipment		
11	□ No		lothes, furs, leather coats, de	esigner wear, shoes, accessories		
			Wearing Apparel & Be	edding		\$200.00
12	☐ No			agement rings, wedding rings, heirloor	n jewelry, watches, gems,	
			Misc. costume jewelr	у		\$100.00
13	Examp ■ No	arm animals bles: Dogs, cats, Describe	birds, horses			
14	■ No	her personal ar	•	d not already list, including any heal	th aids you did not list	
1				Part 3, including any entries for pag	jes you have attached	\$4,300.00
Pa	art 4: De	scribe Your Fina	ncial Assets			

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Official Form 106A/B page 2 Schedule A/B: Property

De	ebtor 1	Samantha R.	Murph	у	Case number (if known)	
					claims or	exemptions.
16.	□ No		•	our wallet, in your home, in	n a safe deposit box, and on hand when you file your petition	
					Cash on hand	\$50.00
17.	Example _				certificates of deposit; shares in credit unions, brokerage houses, and oth the same institution, list each.	ıer similar
	□ No ■ Yes				Institution name:	
			17.1.	Checking Account	PNC Bank	\$800.00
			17.2.	Savings Account	PNC Bank	\$0.00
			17.3.	Prepaid Debit Card	e-Quick Pary Card. This is where debtor's child support gets deposited.	\$50.00
	Example ■ No □ Yes	es: Bond funds, ir	rvestme	Institution or issuer name	ge firms, money market accounts : d and unincorporated businesses, including an interest in an LLC, pa	artnership, and
	joint ve ■ No	nture	mation	about them	% of ownership:	• ′
20.	Negotia Non-neg ■ No	<i>ble instrument</i> s ir	nclude points are	personal checks, cashiers' those you cannot transfer	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
21.		ent or pension a es: Interests in IR			, thrift savings accounts, or other pension or profit-sharing plans	
	Yes. L	ist each account		ely. of account:	Institution name:	
			401(k empl	x) through current oyer	Charles Schwab, not currently drawing	\$0.00
22.	Your sh		deposit	s you have made so that	you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies, or others	
					Institution name or individual:	
			Rent	al Deposit	Landlord	\$759.00

Official Form 106A/B

page 3

Schedule A/B: Property

Debtor 1	Samanth	a R. Murphy			ase number (if known)	
23. Ann	,	ct for a periodic payn	nent of money to you, either for life or	for a number of y	rears)	
	es	Issuer name and de	escription.			
	.S.C. §§ 530(b)(cation IRA, in an acc (1), 529A(b), and 529	count in a qualified ABLE program (b)(1).	, or under a quali	ified state tuition prog	ıram.
	o es	Institution name an	d description. Separately file the reco	ords of any interes	sts.11 U.S.C. § 521(c):	
25. Trus ■ No	•	r future interests in	property (other than anything liste	ed in line 1), and	rights or powers exer	cisable for your benefit
	-	c information about th	nem			
	amples: Internet		e secrets, and other intellectual prosites, proceeds from royalties and lice		s	
□Y€	es. Give specific	c information about th	nem			
Exa ■ No	<i>mples:</i> Building		censes, cooperative association holdi	ngs, liquor license	es, professional licenses	s
□ Ye	es. Give specific	c information about th	nem			
Money	or property ow	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
						ciairis of exemptions.
■ No		•	em, including whether you already file	ed the returns and	I the tax years	ciains of exemptions.
■ No □ Ye 29. Fam Exa □ No	o es. Give specific silly support amples: Past due	information about the	em, including whether you already file		ŕ	
■ No □ Ye 29. Fam Exa □ No	o es. Give specific silly support amples: Past due	information about the	ny, spousal support, child support, ma		ŕ	
■ No □ Ye 29. Fam Exa □ No	o es. Give specific silly support amples: Past due	information about the	, , ,		ŕ	
29. Fam Exa □ No ■ Ye 30. Othe Exa □ No	es. Give specific amples: Past due co es. Give specific er amounts sor amples: Unpaid o benefits	e or lump sum alimon information meone owes you wages, disability insu ; unpaid loans you m c information	ny, spousal support, child support, ma	nintenance, divorce	e settlement, property s Child Support	settlement \$3,000.00
29. Fam Exa No Ye 30. Other Exa No Ye No	es. Give specific anily support amples: Past due co es. Give specific er amounts sor amples: Unpaid v benefits co es. Give specific es. Give specific	meone owes you wages, disability, or life insura	Estimated Arrears rance payments, disability benefits, sade to someone else ance; health savings account (HSA);	nintenance, divorce	e settlement, property s Child Support pay, workers' compens	\$3,000.00 sation, Social Security
29. Fam Exa No Ye 30. Other Exa No Ye No	es. Give specific anily support amples: Past due co es. Give specific er amounts sor amples: Unpaid v benefits co es. Give specific es. Give specific	meone owes you wages, disability, or life insura	Estimated Arrears rance payments, disability benefits, sade to someone else ance; health savings account (HSA);	nintenance, divorce	e settlement, property s Child Support pay, workers' compenser's, or renter's insurance	\$3,000.00 sation, Social Security

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

Official Form 106A/B Schedule A/B: Property page 4

Deb	otor 1	Samantha R. Murphy		Case number (if known)	
	☐ Yes.	Give specific information			
ı	<i>Exam</i> ■ No	s against third parties, whether or not you have filed a law ples: Accidents, employment disputes, insurance claims, or right.		and for payment	
L	→ Yes.	Describe each claim			
	Other	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
		Describe each claim			
_	_	nancial assets you did not already list			
	■ No □ Yes.	Give specific information			
36.		the dollar value of all of your entries from Part 4, includin art 4. Write that number here			\$4,659.00
Part	5: De	escribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. [Do you	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	o to Part 6.			
] Yes. (Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.		u own or have any legal or equitable interest in any farm. Go to Part 7.	or commercial fishir	ng-related property?	
		s. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_		u have other property of any kind you did not already list? ples: Season tickets, country club membership	?		
		Give specific information			
54.	Add	the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	· 8·	List the Totals of Each Part of this Form			
ıaıı		List the Totals of Lacrit art of this Form			
55.	Part '	1: Total real estate, line 2			\$0.00
56.		2: Total vehicles, line 5	\$7,175.00		
57.	Part :	3: Total personal and household items, line 15	\$4,300.00		
58.	Part 4	4: Total financial assets, line 36	\$4,659.00		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 1	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	I personal property. Add lines 56 through 61	\$16,134.00	Copy personal property to	otal \$16,134.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$16,134.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:								
Debtor 1	Samantha R. Mur	phy						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO					
Case number								
(if known)					☐ Check if this is an			
					amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt
---------------------------------------	---------------

1.	Which set of exemptions are	you claiming? Check on	e only, even if your s	pouse is filing with y	ou.
----	-----------------------------	------------------------	------------------------	------------------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Small Appliances, Household Goods & Furnishings	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	202000(: 5)(: 7)(2)
Two t.v.'s, cellphone, and tablet Line from Schedule A/B: 7.1	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
Wearing Apparel & Bedding Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Zine nem concaute / v Zi. T T T			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(1)(2)
Misc. costume jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Ellie Holli Goricadie A/B. 12.1			100% of fair market value, up to any applicable statutory limit	2020:00(\(\)(\(\)(\(\))
Cash on hand Line from Schedule A/B: 16.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line from Schedule FAD. 1911			100% of fair market value, up to any applicable statutory limit	2020100(1.1)(0)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

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btor 1	Samantha R. Murphy			Case number (if known)	
	lescription of the property and line on fulle A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	king Account: PNC Bank rom Schedule A/B: 17.1	\$800.00		75%	Ohio Rev. Code Ann. § 2329.66(A)(13)
				100% of fair market value, up to any applicable statutory limit	, ,
	king Account: PNC Bank	\$800.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
				100% of fair market value, up to any applicable statutory limit	
•	aid Debit Card: e-Quick Pary . This is where debtor's child	\$50.00		\$50.00	Ohio Rev. Code Ann. §
upp	ort gets deposited. rom Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	2329.66(A)(11)
	k) through current employer: les Schwab, not currently	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
Iraw	•			100% of fair market value, up to any applicable statutory limit	2020:00(1)(10)(0)
	k) through current employer: les Schwab, not currently	\$0.00		\$0.00	29 U.S.C. § 1056(d)
Iraw	•			100% of fair market value, up to any applicable statutory limit	
	I Support: Estimated Arrears	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(11)
	om schedule ALD. 25.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(11)
	p term life insurance through ent employer. No cash value.	\$0.00		\$0.00	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05
Bene	ficiary: Mother & Daughter rom Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	ou claiming a homestead exemption ect to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
_	No	and booth a construction	الم مناطع	OAE dave hafara vev (Ned 195)	2
	✓es. Did you acquire the property covel ☐ No	rea by the exemption wi	tnın 1	,215 days before you filed this case	? <i>(</i>
г	7 Ves				

Fill in this inform	nation to identify you	ur case:				
Debtor 1	Samantha R. M	urphy Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	nkruptcy Court for the					
Case number	. ,					
(if known)						if this is an ed filing
Official Form	106D					
		s Who Have Claim	s Secured	by Property	У	12/15
		If two married people are filing to out, number the entries, and attac				
· · ·	have claims secured b	y your property?				
☐ No. Check	this box and submit t	this form to the court with your o	ther schedules. Yo	u have nothing else to	report on this form.	
Yes. Fill in	all of the information	below.		-		
Part 1: List Al	I Secured Claims					
		more than one secured claim, list the	e creditor separately	Column A	Column B	Column C
for each claim. If me	ore than one creditor has	s a particular claim, list the other cre ical order according to the creditor's	ditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Credit Acc	•	Describe the property that secu		\$20,000.00	\$7,175.00	\$12,825.00
Creditor's Name		2013 Chevrolet Malibu 70 Location: 200 Solon Rd., OH 44146				
P.O. Box 5	551888 I, MI 48037	As of the date you file, the clain apply.	n is: Check all that			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated				
Who owes the de		☐ Disputed Nature of lien. Check all that ap	-1.			
_	bt? Check one.	_				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such car loan)	h as mortgage or secu	ured		
Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien	, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit				
Check if this class community del		Other (including a right to offset	Automobile	Loan		
Date debt was incu	2018	Last 4 digits of account i	number <u>9320</u>			
Add the dellar	luo of your antrina ! 6	Column A on this ware. Write that	number bere	\$20.00	0.00	
	page of your form, add	Column A on this page. Write that the dollar value totals from all pa		\$20,00 \$20,00		
Part 2: List Oth	ers to Be Notified fo	or a Debt That You Already Lis	sted			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill	in this inforr	mation to identify your ca	ase:						
Deb	tor 1	Samantha R. Murp	hv						
		First Name	Middle Name	Last Nam	е				
	tor 2 use if, filing)	First Name	Middle Name	Last Nam	e				
		aliminatari Carint fan thai	NODTHERN DI	STRICT OF OHIO					
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DI	STRICT OF ORIO					
	e number _								
(if kno	own)						_	heck if this mended fili	
							aı	nended iii	ıı ıg
Offi	icial Forn	n 106E/F							
Scł	hedule E	F: Creditors W	no Have Ui	nsecured Claim	S			1:	2/15
Sche Sche left. A	dule G: Execu dule D: Credit Attach the Con and case nur	tracts or unexpired leases the tory Contracts and Unexpirors Who Have Claims Secuntinuation Page to this pagember (if known). Il of Your PRIORITY Uns	ed Leases (Officia red by Property. If . If you have no in	al Form 106G). Do not inclu more space is needed, co	ide any cre py the Par	editors with partially t you need, fill it out,	secured claims number the ent	that are list ries in the l	ted in boxes on the
1.	Do any credito	ors have priority unsecured	claims against yo	ou?					
I	□ No. Go to P	Part 2.							
	Yes.								
i I	identify what ty possible, list the Part 1. If more	r priority unsecured claims. pe of claim it is. If a claim has e claims in alphabetical order than one creditor holds a part ation of each type of claim, se	both priority and n according to the cr icular claim, list the	onpriority amounts, list that or reditor's name. If you have not other creditors in Part 3.	claim here a nore than tw	and show both priority	and nonpriority a	mounts. As Continuation	much as on Page of opposite of opposite of the
2.1	East Cl	eveland Tax Departme	ent Last 4	digits of account number	9320	\$2,000.00			\$0.00
	Priority Cr	editor's Name	When	was the debt incurred?	2012-20	 018			
		uclid Ave					_		
		treet City State Zlp Code d the debt? Check one.	_	the date you file, the claim	is: Check	all that apply			
	_		_	ntingent					
	Debtor 1 c	•	_	liquidated					
	Debtor 2 o	•	□ Dis	•					
		and Debtor 2 only		of PRIORITY unsecured cla	ıım:				
	_	ne of the debtors and another	_	mestic support obligations					
		this claim is for a communi	_	kes and certain other debts		o .			
	Is the claim s	subject to offset?	_	ims for death or personal in	ury while yo	ou were intoxicated			
	Yes		□ Oth	ner. Specify Income Ta	X				
_									
Part		II of Your NONPRIORITY							
	_	ors have nonpriority unsecu	_	•					
	L No. You ha	ve nothing to report in this par	t. Submit this form	to the court with your other	schedules.				
t	unsecured clair	r nonpriority unsecured clai m, list the creditor separately for holds a particular claim, lis	for each claim. For	each claim listed, identify w	nat type of o	claim it is. Do not list cl	aims already incl	uded in Par	rt 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

Debtor	Samantha R. Murphy	Case number (if known)	
4.1	Baldwin-Wallace College Nonpriority Creditor's Name	Last 4 digits of account number 2205	\$2,581.88
	275 Eastland Road Berea. OH 44017	When was the debt incurred? 2016	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divo	rce that you did not
	Is the claim subject to offset?	report as priority claims	roo that you did not
	No	lacksquare Debts to pension or profit-sharing plans, and other simila	r debts
	Yes	Other. Specify Judgment	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$163.00
	P.O. Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred? 2016	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divoreport as priority claims	rce that you did not
	■ No	lacksquare Debts to pension or profit-sharing plans, and other simila	r debts
	Yes	■ Other. Specify Credit Card/Collection	
4.3	Columbus Park Apartments	Last 4 digits of account number 4651	\$2,000.00
	Nonpriority Creditor's Name c/o Leasing Office	When was the debt incurred? 2019	
	5999 Bear Creek Dr.	2010	
	Bedford, OH 44146	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divo report as priority claims	rce that you did not
	No	Debts to pension or profit-sharing plans, and other simila	r debts
		•	. 402.0
	Yes	■ Other. Specify Lease Agreement	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 9

Eagle Loan of Ohio	Last 4 digits of account number	1079	\$3,972.00	
Nonpriority Creditor's Name	Last 4 digits of account number		ψ3,912.00	
6817 Pearl Rd.	When was the debt incurred?	2018		
Middleburg Heights, OH 44130-3616 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only				
Debtor 2 only	Contingent			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated			
<u> </u>	☐ Disputed Type of NONPRIORITY unsecured	d alaim.		
At least one of the debtors and another	Student loans	a ciaim:		
☐ Check if this claim is for a community debt				
s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify Loan			
First Energy/Illuminating Company	Last 4 digits of account number	2121	\$410.75	
Nonpriority Creditor's Name 76 South Main Street	When was the debt incurred?	2017		
Akron, OH 44308		2011		
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
□ Yes	■ Other. Specify Utility/Colle			
First Bus was a Court		0000	\$474.00	
First Progress Card Nonpriority Creditor's Name	Last 4 digits of account number	9320	\$174.00	
P.O. Box 84010	When was the debt incurred?	2018		
Columbus, GA 31908	A contract of the state of			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
_				
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed	d alatas		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Ciaim:		
☐ Check if this claim is for a community debt	_	and the second of the second o		
s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts		
□ Yes	Other. Specify Credit Card	01		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 9

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Debtor	1 Samantha R. Murphy	Case number (if known)				
4.7	Gateway Financial Services Nonpriority Creditor's Name PO Box 3257	Last 4 digits of account number When was the debt incurred? 2018	\$9,089.00			
=	Saginaw, MI 48605 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Judgment				
4.8	Kaplan University	Last 4 digits of account number 4373	\$4,005.00			
	Nonpriority Creditor's Name 1515 W Cypress Creek Rd Fort Lauderdale, FL 33309 Number Street City State Zlp Code	When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify School Fee				
4.9	Progressive Direct Insurance Co Nonpriority Creditor's Name	Last 4 digits of account number 69PZ	\$320.15			
	P.O. Box 512929 Los Angeles, CA 90051	When was the debt incurred? 2017				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other. Specify Insurance/Collection				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 9

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Debtor	1 Samantha R. Murphy	Case number (if known)				
4.1 0	Revolutionary Car Credit	Last 4 digits of account number	9320	\$5,000.00		
	Nonpriority Creditor's Name 23600 Lakeshore Blvd. Euclid, OH 44132	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Auto Loan	Deficiency			
4.1	Spectrum	Last 4 digits of account number	9320	\$307.00		
	Nonpriority Creditor's Name PO Box 2553 Columbus, OH 43216	When was the debt incurred?	2018			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	•	,			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Cable/Colle	ection			
4.1	Speedy Cash	Last 4 digits of account number	9320	\$223.00		
	Nonpriority Creditor's Name P.O. Box 780408 Wichita, KS 67278	When was the debt incurred?	2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Payday Loa	an/Collection			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 9

Samantha R. Murphy			
Sprint	Last 4 digits of account number	9320	\$872.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 7949	When was the debt incurred?	2018	
Overland Park, KS 66207-0949			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Phone/Coll	ection	
			4
UES of Bedford	Last 4 digits of account number	7116	\$273.5
Nonpriority Creditor's Name P.O. Box 74630 Cleveland, OH 44194-4630	When was the debt incurred?	2016	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
UHMP Macdonald Women's			
Hospital OB Nonpriority Creditor's Name	Last 4 digits of account number	1926	\$83.6
PO Box 14000 Belfast, ME 04915-4033	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 9

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Debtor	Samantha R. Murphy	Case number (if known)					
4.1			Multiple				
4.1 6	University Hospital	Last 4 digits of account number		\$127.00			
	Nonpriority Creditor's Name PO Box 931242	When was the debt incurred?	2015-2016				
-	Cleveland, OH 44193 Number Street City State Zlp Code	 As of the date you file, the claim	is. Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	As of the date you me, the diam is. Shook an and apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not				
	No	Debts to pension or profit-shari	ing plans, and other similar debts				
	Yes	■ Other. Specify Medical/Co					
				-			
4.1	US Dept of Education	Last 4 digits of account number	9320	\$52,078.00			
	Nonpriority Creditor's Name						
2401 International PO Box 7859		When was the debt incurred?	2010	-			
-	Madison, WI 53704 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.		, to or the date you me, the ordina	10. Chook all that apply				
■ Debtor 1 only		☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	·					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community		Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	☐ Other. Specify					
		Student Lo	oan				
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		_			
is tryir have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	y here. Similarly, if you			
	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?				
	tra Recovery Services	_	Part 1: Creditors with Priority Unsecured Clai				
Suite 1	Vest 33rd St. N I18		Part 2: Creditors with Nonpriority Unsecured	Claims			
Wichit	a, KS 67205	Last 4 digits of account number					
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?				
	rd Municipal Court	· · · · · · · · · · · · · · · · · ·	☐ Part 1: Creditors with Priority Unsecured Clai	ims			
165 Center Road		I	Part 2: Creditors with Nonpriority Unsecured	Claims			
bearo	rd, OH 44146	Last 4 digits of account number	5855				
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?				
Bedfo	rd Municipal Court		\square Part 1: Creditors with Priority Unsecured Clai	ims			
	enter Road		Part 2: Creditors with Nonpriority Unsecured	Claims			
Dea10	rd, OH 44146	Last 4 digits of account number	4651				
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

Debtor 1 Samantha R. Murphy	Case number (if known)
Bedford Municipal Court 165 Center Road	Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Bedford, OH 44146	Last 4 digits of account number 2205
Name and Address Cuyahoga County Clerk of Courts 1200 Ontario St.	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Cleveland, OH 44113	Last 4 digits of account number 6609
Name and Address ERC	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one):
P.O. Box 57547 Jacksonville, FL 32241	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address ERC	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one):
P.O. Box 57547 Jacksonville, FL 32241	Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address First Federal Credit Control 24700 Chagrin Blvd. #205	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Beachwood, OH 44122	Last 4 digits of account number xx68
Name and Address Keith Weiner & Associates	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one):
75 Public Square, 4th FI. Cleveland, OH 44113	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 2205
Name and Address Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 2557
Name and Address RMS PO Box 361598 Suite 100	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43236	Last 4 digits of account number 5594
Name and Address RMS PO Box 361595 Columbus, OH 43236	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 22NA
Name and Address Slovin & Associates 644 Linn St. Suite 720	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati, OH 45203-1733	Last 4 digits of account number 6609
Name and Address Sunrise Credit Services P.O. Box 9100 Forming dela NV 11735 0100	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Farmingdale, NY 11735-9100	Last 4 digits of account number 1180
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

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Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1	Samantha	R. Murphy
----------	----------	-----------

Valente Law LLC 77 Milford dr. Suite 226 Hudson, OH 44236

Case number (if known)

☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Line 4.3 of (Check one):

4651

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,000.00
	6f.	Student loans	6f.	\$ Total Claim 52,078.00
Total claims from Part 2	6~	Obligations spining out of a consention agreement or diverse that		<u> </u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 29,601.90
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 81,679.90

Fill in this infor	mation to identify your	case:			
Debtor 1	Samantha R. Mur	rphy			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					Check if this is an
,				_	amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this i	nformation to identify your	case:			
Debtor 1	Samantha R. Mur	phy			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case numb	er				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
fill it out, an your name a		boxes on the left. Attack Answer every question	n the Additional Page to 	this page. On the top	eeded, copy the Additional Page, of any Additional Pages, write
□ No ■ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana,				states and territories include
■ No. 0	Go to line 3.				
	Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line : Form 1	2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make s	ure you have listed the	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
1	acqueline Murphy 3806 Coath Avenue develand, OH 44120			☐ Schedule D, lir ■ Schedule E/F, ☐ Schedule G Eagle Loan of Ol	line 4.4

Fill	in this information to iden	tify your ca	ase:				1				
			. Murphy								
	btor 2										
Uni	ited States Bankruptcy Co	ourt for the	NORTHERN DISTRIC	CT OF OHIO							
	se number 								ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106	<u> 31</u>					N	// DD/ Y	YYYY		
S	chedule I: You	ır Inco	ome								12/15
spo atta	plying correct informations. If you are separated that a separate sheet to the separate sheet to the separate sheet to the separate sheet sheet to the separate sheet sh	d and you his form. (ployment	r spouse is not filing wi	th you, do not inclu	ude infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	If you have more than one job,	ne ioh		■ Employed				☐ Empl		g spease	
	attach a separate page information about addition	with	Employment status	☐ Not employed					mployed		
	employers.		Occupation	Legal Specialis	st						
	Include part-time, seaso self-employed work.	onal, or	Employer's name	Weltman, Wein	berg &	Reis	<u> </u>				
	Occupation may include or homemaker, if it appl		Employer's address	965 Keynote C Brooklyn Heigl		441	31				
			How long employed the	here? 1 mon	th			_			
Par	rt 2: Give Details A	bout Mon	thly Income								
spoi	mate monthly income as use unless you are separa ou or your non-filing spous	ated.		-		•			·	·	
mor	e space, attach a separate	e sheet to	this form.				-	·			
							For Del	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	2	,253.33	\$	N/A	
3.	Estimate and list mon	thly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Incom	ne. Add lin	e 2 + line 3.		4.	\$	2,2	53.33	\$	N/A	

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12.	\$_	2,050.03
		nbined

0.00

13. Do you expect an increase or decrease within the year after you file this form?

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

No.	
Yes. Explain:	

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	btor 1 Samantha R. Murphy		Che	eck if this is:	
				An amended filing	
Deb	btor 2				ving postpetition chapter
(Spo	pouse, if filing)			13 expenses as of	the following date:
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			MM / DD / YYYY	
Cas	se number				
(If k	known)				
Of	official Form 106J				
S	chedule J: Your Expenses				12/15
	as complete and accurate as possible. If two married people are filing	n together, both s	are ear	ially responsible fo	
info	formation. If more space is needed, attach another sheet to this form. (mber (if known). Answer every question.				
Par	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Se</i>	narata Hayaahala	of Dak	otor 2	
	Tes. Debior 2 must life Official Form 1063-2, Expenses for Se	eparate mouseriold	o Dec	OIOI 2.	
2.	Do you have dependents? ☐ No				
		endent's relationsh otor 1 or Debtor 2	nip to	Dependent's age	Does dependent live with you?
	De contratate the				□ No
	Do not state the dependents names.	ughter		6 yrs	■ Yes
		-			□ No
					☐ Yes
					□ No
					□ Yes
					□ No
					□ Yes
3.	Do your expenses include ■ No				– 100
	expenses of people other than				
	yourself and your dependents?				
Par	rt 2: Estimate Your Ongoing Monthly Expenses				
Est exp	timate your expenses as of your bankruptcy filing date unless you are penses as of a date after the bankruptcy is filed. If this is a supplemen plicable date.				
	alada aanaa aadd faaadd maa a daa a da				
	clude expenses paid for with non-cash government assistance if you k e value of such assistance and have included it on Schedule I: Your In				
	fficial Form 1061.)	oome		Your expe	enses
•	•				
4.	The rental or home ownership expenses for your residence. Include	first mortgage	_	_	750.00
	payments and any rent for the ground or lot.		4.	\$	759.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	\$	0.00
	4d. Homeowner's association or condominium dues		4d.	\$	0.00
5.	Additional mortgage payments for your residence, such as home equ	uity loans	5.	\$	0.00

ebtor 1	Samantl	na R. Murphy	Case numb	per (if known)	
. Utili	ities:				
6a.		, heat, natural gas	6a.	\$	120.00
6b.	•	wer, garbage collection	6b.	·	0.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
6d.	•	ecify: Cellphone		\$	40.00
	•	ekeeping supplies		\$	150.00
		children's education costs	8.	\$	200.00
		Iry, and dry cleaning		\$	50.00
	-	products and services		\$	20.00
		ntal expenses	11.	\$	20.00
		Include gas, maintenance, bus or train fare.	11.	Ψ	20.00
	•	ar payments.	12.	\$	100.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
		tributions and religious donations	14.	·	0.00
	irance.	and rengious donations	17.	Ψ	0.00
		nsurance deducted from your pay or included in lines 4 or 2	0.		
	. Life insura		15a.	\$	0.00
15b	. Health ins	surance	15b.	\$	0.00
15c	. Vehicle in	surance		\$	0.00
		urance. Specify:		\$	0.00
		nclude taxes deducted from your pay or included in lines 4 or			0.00
Spe		iolado taxos abadotod from your pay of infoladod in infos 4 c	16.	\$	0.00
		ease payments:		•	
		ents for Vehicle 1	17a.	\$	364.00
17b	. Car paym	ents for Vehicle 2	17b.	\$	0.00
17c.	Other. Sp	ecify: Furniture Installment Payment	17c.	\$	140.00
	. Other. Sp		17d.	\$	0.00
. You	ır payments	of alimony, maintenance, and support that you did not	report as	<u> </u>	
ded	ucted from	your pay on line 5, Schedule I, Your Income (Official Fo	rm 106l). 18.	\$	0.00
. Oth	er payment	s you make to support others who do not live with you.		\$	0.00
Spe			19.		
		erty expenses not included in lines 4 or 5 of this form of			
		s on other property	20a.		0.00
20b	. Real esta	te taxes	20b.	·	0.00
20c.	. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenaı	nce, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowr	ner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:		21.	+\$	0.00
0-1					
		monthly expenses through 21.		¢	0.440.00
		3	- 400 L O	\$	2,113.00
		2 (monthly expenses for Debtor 2), if any, from Official Form	n 106J-2	\$	
22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	2,113.00
Calc	culate vour	monthly net income.	l		
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,050.03
		r monthly expenses from line 22c above.	23b.		2,113.00
_00	. Sopy you		200.		<u> </u>
23c	Subtract v	your monthly expenses from your monthly income.			
_00.		t is your monthly net income.	23c.	\$	-62.97
For e	example, do y ification to the	an increase or decrease in your expenses within the ye ou expect to finish paying for your car loan within the year or do you terms of your mortgage?	ar after you file this expect your mortgage p	form? ayment to increase	or decrease because of a
I					
	es.	Explain here:			

	ation to identify you				
Debtor 1	Samantha R. Mu	Irphy Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)				_	ck if this is an ended filing
Official Form Declarati		an Individual	Debtor's Sc	hedules	12/15
obtaining money years, or both. 18		in connection with a bank		. Making a false statement, conceal n fines up to \$250,000, or imprisoni	
Did you pay	or agree to pay som	eone who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. Na	ame of person			Attach Bankruptcy Petition Declaration, and Signature	
	y of perjury, I declar true and correct.	e that I have read the sumi	nary and schedules filed	d with this declaration and	
X /s/ Sama	antha R. Murphy		X		
Samant	ha R. Murphy of Debtor 1		Signature of I	Debtor 2	
Date M	arch 7, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Fill in this infor	mation to identify you	r case:						
Debtor 1	Samantha R. Mu							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO					
Casa numbar		-						
Case number (if known)					Check if this is an			
				a	mended filing			
Official Ec	vrm 107							
Official Fo		Affairs for Individ	duals Filing for B	ankruntev	4/16			
Be as complete information. If r	and accurate as poss nore space is needed, n). Answer every que	ible. If two married people a attach a separate sheet to stion.	are filing together, both are this form. On the top of any	equally responsible for sup y additional pages, write you				
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before					
1. What is you	ır current marital statı	ıs?						
☐ Marrie								
■ Not ma	arried							
2. During the	ring the last 3 years, have you lived anywhere other than where you live now?							
□ No								
Yes. Li	es. List all of the places you lived in the last 3 years. Do not include where you live now.							
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
	r Creek Drive Apt. 5 OH 44146	05 From-To: 2012-2019	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:			
states and territo No	<i>rie</i> s include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and W				
Part 2 Expla	in the Sources of You	ır Income						
Fill in the to	al amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		ndar years?			
□ No								
Yes. F	II in the details.							
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,513.61	☐ Wages, commissions, bonuses, tips				
		☐ Operating a business		☐ Operating a business				
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page 1			

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Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

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	16CVF02205		, ,	1140	■ Concluded Judgment for plaintiff				
	Baldwin Wallace College vs. Samantha R. Murphy	Complaint for money	Bedford Munic 165 Center Roa Bedford, OH 44	ad	☐ Pending ☐ On appeal				
	Columbus Park Apartments vs. Samantha R. Murphy 18CVG04651	Eviction	Bedford Munic 165 Center Roa Bedford, OH 44	ad	□ Pending□ On appeal■ ConcludedDismissed w/o prejudice				
	Case number Columbus Park Apartments vs. Samantha R. Murphy 18CVG05194	Eviction	Bedford Munic 165 Center Roa Bedford, OH 44	ad	☐ Pending ☐ On appeal ■ Concluded Dismissed w/o prejudice				
	☐ No ☐ Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case				
9.	within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in a							
Da	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name				
	■ No □ Yes. List all payments to an insider	,							
8.	insider?	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an							
	■ No □ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment				
	Within 1 year before you filed for bankrupt Insiders include your relatives; any general performance of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any genomination control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one fo				
7.	Military Assessment of the second control of				was an insider?				

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Samantha R. Murphy

Del	otor 1 Samantha R. Murphy	Case number	(if known)	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo	ccy, was any of your property repossessed, foreclosed	d, garnished, attache	d, seized, or levied?
	□ No. Go to line 11.			
	Yes. Fill in the information below.			
		Describe the Description	Data	Value of the
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		
	Baldwin-Wallace College 275 Eastland Road Berea, OH 44017	Wage garnishment. In the last 90 days a total of \$285.13 was garnished from debtor.	September	\$1,166.10
	Berea, Ori 44017	☐ Property was repossessed.		
		☐ Property was foreclosed.		
		■ Property was garnished.		
		☐ Property was attached, seized or levied.		
		.,.,		
	Gateway Financial Solutions P.O. Box 3257 Saginaw, MI 48605	Wage garnishment. In the last 90 days a total of \$363.86 was garnished from debtor.	01/11/19-pres ent	\$363.86
	Saginaw, Wii 40003	☐ Property was repossessed.		
		☐ Property was foreclosed.		
		■ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.	ptcy, did any creditor, including a bank or financial in cause you owed a debt?	stitution, set off any a	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a	ccy, was any of your property in the possession of an another official?	assignee for the ben	efit of creditors, a
	■ No			
	☐ Yes			
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankru ■ No	otcy, did you give any gifts with a total value of more t	than \$600 per person	?
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	otcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con	ntribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name	tal Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

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Deb	otor 1	Samantha R. Murphy		C	ase number (if known)	
Par	t 6:	List Certain Losses					
15.		n 1 year before you filed for bankru mbling?	ptcy or	since you filed for bankruptcy, did y	ou lose anytl	ning because of the	ft, fire, other disaster,
		No					
	_ '	√es. Fill in the details.					
	Desc	cribe the property you lost and	Descri	pe any insurance coverage for the lo	oss	Date of your	Value of property
	how	the loss occurred		the amount that insurance has paid. L ce claims on line 33 of Schedule A/B:		loss	lost
Par	t 7:	List Certain Payments or Transfers	5				
16.	consu	ulted about seeking bankruptcy or	preparin	d you or anyone else acting on your ig a bankruptcy petition? s, or credit counseling agencies for sen			erty to anyone you
		No					
		es. Fill in the details.					
	Addr Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	ou′	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
	614	ser & Associates W. Superior Ave. Suite 950 reland, OH 44113		Attorney Fee		02/25/19	\$980.00
	3650	enpath 00 Corporate Drive nington, MI 48331		Credit Counseling		03/01/19	\$25.00
17.	prom		ditors or	d you or anyone else acting on your to make payments to your creditors ed on line 16.		r transfer any prope	erty to anyone who
		No					
		es. Fill in the details.					
	Pers Addr	on Who Was Paid ess		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
		ed Credit Education Services ngton, VA 22210		Debt repair program. Debtor w program for about 4 months. S \$80/month.		February 2018-May 2018	\$320.00
	 18. Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details. 		ir busine s made a	ess or financial affairs? as security (such as the granting of a se			
	Pers Addr	on Who Received Transfer ress		Description and value of property transferred		iny property or received or debts change	Date transfer was made
	Pers	on's relationship to you				J	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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19.	beneficiary? (These are often called asset-protection devices.) No					
	Yes. Fill in the details. Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and S	Storage Unit	es	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificate	s of deposi		
	Yes. Fill in the details. Name of Financial Institution and L	_ast 4 digits of	Type of acco	ount or	Date account was	Last balance
		account number	instrument	ount of	closed, sold, moved, or transferred	before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	any safe dep	oosit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befor	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		the property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun			
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		environmental	law, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	zardous substance, toxi	c substance,
Rep	ort all notices, releases, and proceedings that	you know about, rega	ardless of whe	n they occu	urred.	

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	unc	der or in violation of an environm	ental law?			
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
26.	Hav	re you been a party in any judicial or adm	ninistrative proceeding under any envi	ironı	mental law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or (Connections to Any Business						
27.	Wit	hin 4 vears before you filed for bankrupt	cv. did vou own a business or have ar	າv of	the following connections to an	v business?			
		Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability comp			•				
		☐ A partner in a partnership			,				
		☐ An officer, director, or managing exe	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	•						
		No. None of the above applies. Go to P	Part 12.						
		Yes. Check all that apply above and fill		S					
		siness Name	Describe the nature of the business	J.	Employer Identification number	r			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security				
	`	, , ,	name of accountant of bookkeeper		Dates business existed				
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement	to ar	nyone about your business? Incl	ude all financial			
		No Yes. Fill in the details below.							
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued						
	(NU	misser, on eet, only, state and zir code)							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Samantha R. Murphy		Case number (if known)
Part 12: Sign Below		
are true and correct. I understand tha	at making a false statement, concealing property fines up to \$250,000, or imprisonment for up to	and I declare under penalty of perjury that the answers y, or obtaining money or property by fraud in connection 20 years, or both.
/s/ Samantha R. Murphy		
Samantha R. Murphy Signature of Debtor 1	Signature of Debtor 2	
Date March 7, 2019	Date	
Did you attach additional pages to Yo ■ No □ Yes	our Statement of Financial Affairs for Individuals	s <i>Filing for Bankruptcy</i> (Official Form 107)?
Did you pay or agree to pay someone	e who is not an attorney to help you fill out bank	cruptcy forms?
■ No	, , ,	• •

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inform				
Debtor 1	nation to identify your			
Deploi	Samantha R. Mur	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
		n for Indiv	viduals Filing Under Chapte	er 7
				12/10
If you are an indiv	vidual filing under chap	oter 7, you must fil	Il out this form if:	
creditors have	claims secured by yo	ur property, or		
	ed personal property a			
			you file your bankruptcy petition or by the date so the time for cause. You must also send copies to the	
on the f		e court exterius tri	e time for cause. For must also send copies to the	e creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying correct i	nformation. Both debtors must
Be as complete a	and accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. On	the top of any additional pages,
	our name and case nun		·	
Part 1: List Yo	our Creditors Who Have	Secured Claims		
For any creditorinformation be		rt 1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	editor and the property the	nat is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
			Scource a dest.	as exempt on concade o.
Creditor's C	redit Acceptance		☐ Surrender the property.	□No
name:			Retain the property and redeem it.	_
Description of	2013 Chevrolet Ma	libu 70 000	Retain the property and enter into a	Yes
property	miles		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	Location: 200 Solo Bedford OH 44146	n Rd.,		
	Bealora Off 44 140			_
	our Unexpired Persona		in Schedule G: Executory Contracts and Unexpir	ad Lassas (Official Form 106C) fill
in the information	n below. Do not list rea	I estate leases. Un	nexpired leases are leases that are still in effect; the	ne lease period has not yet ended.
You may assume	an unexpired persona	I property lease if	the trustee does not assume it. 11 U.S.C. § 365(p)	(2).
Describe your u	nexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:	ead			□ No
Description of lea Property:	seu			☐ Yes
Official Form 108		Statement of Ir	ntention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Debtor	Samantha R. Murphy	Case number (if known)				
	s name:	□ No				
Propert	vion of leased y:	☐ Yes				
	s name:	□ No				
Propert	vion of leased y:	☐ Yes				
	s name:	□ No				
Description of leased Property:		☐ Yes				
	s name:	□ No				
Propert	otion of leased y:	☐ Yes				
	s name:	□ No				
Propert	tion of leased y:	☐ Yes				
Part 3:	Sign Below					
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.						
		(
	amantha R. Murphy gnature of Debtor 1	Signature of Debtor 2				
Da	March 7, 2019	Date				

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Fi	ll in this inforn	nation to identify your case:					s directed in this form and	in Form
D	ebtor 1	Samantha R. Murphy			122	2A-1Supp:		
1	ebtor 2 pouse, if filing)				•	1. There is no pr	resumption of abuse	
Uı	nited States B	eankruptcy Court for the: Northern District of	Ohio		_	applies will be	on to determine if a presum e made under <i>Chapter 7 M</i> Official Form 122A-2).	•
	ase number known)				.		,	
(11	Kilowiij						est does not apply now becary service but it could app	
						☐ Check if this is	s an amended filing	
0	official Fo	orm 122A - 1						
C	hapter	7 Statement of Your Cur	rent	Mor	nthly Inc	ome		12/15
atta cas qua	ach a separate se number (if k alifying militar	nd accurate as possible. If two married people a sheet to this form. Include the line number to wl nown). If you believe that you are exempted fron y service, complete and file Statement of Exempt culate Your Current Monthly Income	nich the a	additior mption	nal information a of abuse becau	applies. On the top o se you do not have p	f any additional pages, write orimarily consumer debts or	your name and because of
1	. What is ye	our marital and filing status? Check one on	٧.					
		arried. Fill out Column A. lines 2-11.	,					
	_	d and your spouse is filing with you. Fill ou	both Co	olumns	A and B. lines	2-11.		
		d and your spouse is NOT filing with you.						
	_	ng in the same household and are not legal		•	•	lumns A and B. line	es 2-11.	
	☐ Livir pen	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are leg apart for reasons that do not include evadin	ut Colun gally sep	nn A, lii parated	nes 2-11; do no d under nonban	ot fill out Column B. kruptcy law that ap	By checking this box, you plies or that you and your	
	101(10A). For the 6 months,	rage monthly income that you received from all sexample, if you are filing on September 15, the 6-months and divide the total in the same rental property, put the income from that property in the income from that property is the income from the property in the property in the income from the property in the prop	onth perio by 6. Fill i	d would n the re	be March 1 throusult. Do not include	ugh August 31. If the a de any income amoun	amount of your monthly income t more than once. For example	e varied during e, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2	2. Your gros	ss wages, salary, tips, bonuses, overtime, aductions).	ind com	missio	ons (before all	\$ 2,057.32	2 \$	
3	3. Alimony a Column B	and maintenance payments. Do not include is filled in.	payment	s from	a spouse if	\$ 0.00	D \$	
4	of you or from an ur and roomr	nts from any source which are regularly payour dependents, including child support. Imarried partner, members of your household nates. Include regular contributions from a spoon of include payments you listed on line 3.	Include your de	regular pende	contributions nts, parents,	\$ 243.33	3 \$	
5	5. Net incom	ne from operating a business, profession, o	or farm					
			•		otor 1			
		eipts (before all deductions)	\$	0.00				
	•	and necessary operating expenses	-\$	0.00	Copy here ->	\$ 0.00) \$	
١,		ly income from a business, profession, or farm	า\$	0.00	Copy here ->	5 0.00	φ	
6	6. Net incom	ne from rental and other real property		Deh	otor 1			
	Gross ross	eipts (before all deductions)	\$	0.00				
		and necessary operating expenses	-\$ —	0.00				
	-	ly income from rental or other real property	\$		Copy here ->	\$ 0.00	\$	
1		,						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

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7. Interest, dividends, and royalties

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amounthe Social Security Act. Instead, list it here:	t received was a benef	it under				
	For you\$	0.	00				
	For you \$ For your spouse \$						
9.	Pension or retirement income. Do not include any an benefit under the Social Security Act.		s a	\$	0.00	\$	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or international a separate page and po	ts or	\$	0.00	\$	
	•			\$	0.00	\$	
	Total amounts from separate pages, if any.		— .	\$	0.00	\$	
	rotal amounts nom separate pages, il any.			Ψ	0.00	Ψ	
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	2,300.65	+ \$		= \$ 2,300.65
			,				Total current monthly income
Part	Determine Whether the Means Test Applies t	o You					
12.	Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$\$
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b.	\$27,607.80
13.	Calculate the median family income that applies to	you. Follow these step	os:				
	Fill in the state in which you live.	ОН					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go	online using the link s		in the separa		13. tions	\$60,822.00
11	for this form. This list may also be available at the bank How do the lines compare?	ruptcy cierk's office.					
14.	<u> </u>						
	 Line 12b is less than or equal to line 13. O Go to Part 3. Line 12b is more than line 13. On the top of 						
	Go to Part 3 and fill out Form 122A-2.	or page 1, check box 2	Trie pre	esumpuon or	abuse is (determined by	FOIII 122A-2.
Part							
	By signing here, I declare under penalty of perjury	that the information of	n this sta	atement and i	n any atta	chments is tru	ue and correct.
	χ /s/ Samantha R. Murphy						
	Samantha R. Murphy Signature of Debtor 1						
	Date March 7, 2019 MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file Forn	n 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and f						
	, and a supplied that the supplied to the supp						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dollar General

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$16,439.18 from check dated 8/31/2018 .

Ending Year-to-Date Income: \$24,269.45 from check dated 12/31/2018 .

This Year:

Current Year-to-Date Income: \$2,433.61 from check dated 2/28/2019 .

Income for six-month period (Current+(Ending-Starting)): \$10,263.88.

Average Monthly Income: **\$1,710.65**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Weltman, Weinberg & Reis

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$0.00 from check dated 8/31/2018 Ending Year-to-Date Income: \$0.00 from check dated 12/31/2018

This Year:

Current Year-to-Date Income: \$2,080.00 from check dated 2/28/2019

Income for six-month period (Current+(Ending-Starting)): $\underline{\$2,080.00}$.

Average Monthly Income: \$346.67.

Line 4 - Child support income (including foster care and disability)

Source of Income: **ODJFS**

Income by Month:

111001110 0) 1:10111111		
6 Months Ago:	09/2018	\$232.84
5 Months Ago:	10/2018	\$243.85
4 Months Ago:	11/2018	\$354.37
3 Months Ago:	12/2018	\$273.88
2 Months Ago:	01/2019	\$108.71
Last Month:	02/2019	\$246.33
	Average per month:	\$243.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Samantha R. Murphy		Case No) .	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services	
	For legal services, I have agreed to accept		\$	980.00	
	Prior to the filing of this statement I have received		\$	980.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are me	mbers and associates	s of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspec	ts of the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secure of the se	tement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex- ons as needed; preparatior	n may be required; nd any adjourned h emption plannin	earings thereof;	d filing of
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			ices, relief from s	tay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an anaruptcy proceeding.	ny agreement or arrangement for	r payment to me for	representation of th	e debtor(s) in
N	larch 7, 2019	/s/ Anna Marie W	'all		
\overline{I}	ate	Anna Marie Wall			
		Signature of Attorne Rauser & Associ	•		
		614 W. Superior	# 950		
		Cleveland, OH 44 216-263-6200 Fa			
		www.ohiolegalclinic.com			
		Name of law firm			

United States Bankruptcy Court Northern District of Ohio

In re	Samantna K. Murpny		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR M	IATRIX	
he abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and corn	rect to the best	t of his/her knowledge.
Date:	March 7, 2019	/s/ Samantha R. Murphy		
		Samantha R. Murphy		

Signature of Debtor

AD Astra Recovery Services 7330 West 33rd St. N Suite 118 Wichita, KS 67205

Baldwin-Wallace College 275 Eastland Road Berea, OH 44017

Bedford Municipal Court 165 Center Road Bedford, OH 44146

Bedford Municipal Court 165 Center Road Bedford, OH 44146

Bedford Municipal Court 165 Center Road Bedford, OH 44146

Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285

Columbus Park Apartments c/o Leasing Office 5999 Bear Creek Dr. Bedford, OH 44146

Credit Acceptance P.O. Box 551888 Southfield, MI 48037

Cuyahoga County Clerk of Courts 1200 Ontario St. Cleveland, OH 44113

Eagle Loan of Ohio 6817 Pearl Rd. Middleburg Heights, OH 44130-3616

East Cleveland Tax Department 14340 Euclid Ave

ERC P.O. Box 57547 Jacksonville, FL 32241

ERC P.O. Box 57547 Jacksonville, FL 32241 First Energy/Illuminating Company 76 South Main Street Akron, OH 44308

First Federal Credit Control 24700 Chagrin Blvd. #205 Beachwood, OH 44122

First Progress Card P.O. Box 84010 Columbus, GA 31908

Gateway Financial Services PO Box 3257 Saginaw, MI 48605

Jacqueline Murphy 13806 Coath Avenue Cleveland, OH 44120

Kaplan University 1515 W Cypress Creek Rd Fort Lauderdale, FL 33309

Keith Weiner & Associates 75 Public Square, 4th Fl. Cleveland, OH 44113

Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502

Progressive Direct Insurance Co P.O. Box 512929 Los Angeles, CA 90051

Revolutionary Car Credit 23600 Lakeshore Blvd. Euclid, OH 44132

RMS PO Box 361598 Suite 100 Columbus, OH 43236

RMS PO Box 361595 Columbus, OH 43236

Slovin & Associates 644 Linn St. Suite 720 Cincinnati, OH 45203-1733 Spectrum PO Box 2553 Columbus, OH 43216

Speedy Cash P.O. Box 780408 Wichita, KS 67278

Sprint Attn: Bankruptcy Dept. P.O. Box 7949 Overland Park, KS 66207-0949

Sunrise Credit Services P.O. Box 9100 Farmingdale, NY 11735-9100

UES of Bedford P.O. Box 74630 Cleveland, OH 44194-4630

UHMP Macdonald Women's Hospital OB PO Box 14000 Belfast, ME 04915-4033

University Hospital PO Box 931242 Cleveland, OH 44193

US Dept of Education 2401 International PO Box 7859 Madison, WI 53704

Valente Law LLC 77 Milford dr. Suite 226 Hudson, OH 44236